PTO/SB/30 (07-09)
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Request	A salisation Number	00/000 000		
· ·	Application Number	09/889,203		
for (DOE)	Filing Date	January 6, 2000 (Int'l)		
Continued Examination (RCE) Transmittal	First Named Inventor	Tracey J. BROWN		
Address to:	Art Unit	1618		
Mail Stop RCE Commissioner for Patents	Examiner Name	B. Fubara		
P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket Number	229752005700		

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June

8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.										
amendme	ents enclos does not v	uired under 37 CFR 1.114 Note sed with the RCE will be entered in t wish to have any previously filed und	the order ir	n which they w	ere filed ur	nless applic				
		ly submitted. If a final Office act considered as a submission evel				nents filed	after the final Office action			
i	Consider the arguments in the Appeal Brief or Reply Brief previously filed on									
ii.	Othe	r								
b. X E	Enclosed	d								
i.	X Ame	ndment/Reply – 18 pages	iii. x	Information Supplemer			ent (IDS),			
ii.	Affida	avit(s)/Declaration(s)	iv. x	Ex Other <u>PT</u>	tension o	f Time – A/B- 4 pa	1 page; Form ges; and 51 References			
2. Miscella	aneous]								
		ion of action on the above-ident		'			. ,			
b (Other _									
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.										
	a. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any Overpayments, to Deposit Account No03-1952									
i.	X RCE	fee required under 37 CFR 1.13	7(e)							
ii. X Extension of time fee (37 CFR 1.136 and 1.17)										
iii. 「	Othe	ır								
b	 Check in	the amount of \$			osed					
c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED										
Signature	/I	Kimberly A. Bolin/			Date	August	17, 2009			
Name (Print/Typ	pe) K	(imberly A. Bolin			Registra	ation No.	44,546			